

AMENDMENT TRANSMITTAL LETTER				Docket No. 1254-0255PUS1																																					
Application No. 10/506,325-Conf. #8827		Filing Date September 2, 2004		Examiner T. P. Thomas																																					
Art Unit 1609																																									
Applicant(s): Kenji TAYAMA et al.																																									
Invention: COMPOSITION FOR PREVENTING HYPERTENSION																																									
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																									
<p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>																																									
CLAIMS AS AMENDED <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%; text-align: center;">Claims Remaining After Amendment</th> <th style="width: 15%; text-align: center;">Highest Number Previously Paid</th> <th style="width: 15%; text-align: center;">Number Extra Claims Present</th> <th style="width: 15%; text-align: center;">Rate</th> <th style="width: 15%;"></th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">Total Claims</td> <td style="text-align: center;">4</td> <td style="text-align: center;">- 20 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 50.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td style="text-align: left;">Independent Claims</td> <td style="text-align: center;">1</td> <td style="text-align: center;">- 3 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 210.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td colspan="6" style="text-align: center; border-top: 1px solid black; border-bottom: 1px solid black;"> Multiple Dependent Claims (check if applicable) <input type="checkbox"/> </td> </tr> <tr> <td colspan="6" style="text-align: center; border-bottom: 1px solid black;"> Other fee (please specify): Extension for response within third month 1,050.00 </td> </tr> <tr> <td colspan="6" style="text-align: center; border-top: 1px solid black; border-bottom: 3px double black;"> TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 1,050.00 </td> </tr> </tbody> </table>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	4	- 20 =	0	x 50.00	0.00	Independent Claims	1	- 3 =	0	x 210.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify): Extension for response within third month 1,050.00						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 1,050.00					
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